



17W  
AF ✓

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional)  42P17013
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.		In re Application of <b>Louis A. Lippincott, et al.</b>
Application Number <b>10/611,377</b>		Filed <b>06/30/2003</b>
For: <b>CONTROLLING MEMORY ACCESS DEVICES IN A DATA DRIVEN ARCHITECTURE MESH</b>		
Signature <u></u> Typed or printed name <b>Jessica M. Huester</b>		Art Unit <b>2183</b>
		Examiner <b>Cody, Dillon J.</b>
Applicant hereby <b>appeals</b> to the Board of Patent Appeals and Interferences from the last decision of the examiner.		
The fee for this Notice of Appeal is (37 CFR 1.17(b))		<u>\$540.00</u>
<input type="checkbox"/> Applicant claims small entity status under 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: _____		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>02-2666</u>		
<input checked="" type="checkbox"/> Per MPEP 1204.01, any previously paid appeal fees set forth in 37 CFR 41.20 for filing a notice of appeal will be applied to the new appeal in the same application as long as a final Board decision has not been made on the prior appeal. In accordance with MPEP, 1204.01, The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>02-2666</u> .		
<input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.		
I am the		
<input type="checkbox"/> applicant/inventor.		Signature
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		<u>Farzad E. Amini, Reg. No. 42,261</u> Typed or printed name
<input checked="" type="checkbox"/> attorney or agent of record.		<u>2.10.09</u> Date
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		
<input type="checkbox"/> *Total of _____ forms are submitted.		

Based on PTO/SB/31 (01-08) as modified by Blakely, Solokoff, Taylor & Zafman (wlr) 3/3/2008.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

02/19/2009 EFLORES 00000018 022666 10611377

01 FC:1401

540.00 DA



# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

	Application No.	10/611,377	
	Filing Date	June 30, 2003	
	First Named Inventor	Louis A. Lippincott	
	Art Unit	2183	
	Examiner Name	Cody, Dillon J.	
Total Number of Pages in This Submission	4	Attorney Docket Number	42P17013

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Reply  <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> PTO/SB/08  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Other Enclosure(s) (please identify below): <div></div>
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Farzad E. Amini, Reg. No. 42,261 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	02/13/09

## CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Jessica M. Huester		
Signature		Date	02/13/09



# FEE TRANSMITTAL for FY 2007

Patent fees are subject to annual revision.

Complete if Known

Application Number	10/611,377
Filing Date	June 30, 2003
First Named Inventor	Louis A. Lippincott
Examiner Name	Cody, Dillon J.
Art Unit	2183
Attorney Docket No.	42P17013

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 540.00

## METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_
- ☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☒ Credit any overpayments
- ☐ Charge fee(s) indicated below, except for the filing fee ☒ Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.
- ☒ Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.

## FEE CALCULATION

### 1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
28	29*	0	\$0.00
5	5*	0	\$0.00

Multiple Dependent

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	
1202 52	2202 26	Claims in excess of 20
1201 220	2201 110	Independent claims in excess of 3
1203 390	2203 195	Multiple Dependent claim, if not paid
1204 330	2204 165	**Reissue independent claims over original patent
1205 330	2205 165	**Reissue claims in excess of 20 and over original patent

\*\*or number previously paid, if greater, For Reissues, see below

SUBTOTAL (1) (\$) 0.00

### 2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	
1051 130	2051 65	Surcharge - late filing fee or oath
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet.
2053 130	2053 130	Non-English specification
1251 130	2251 65	Extension for reply within first month
1252 490	2252 245	Extension for reply within second month
1253 1,110	2253 555	Extension for reply within third month
1254 1,730	2254 865	Extension for reply within fourth month
1255 2,350	2255 1,175	Extension for reply within fifth month
1401 540	2401 270	Notice of Appeal
1402 540	2402 270	Filing a brief in support of an appeal
1403 1,080	2403 540	Request for oral hearing
1451 1,510	2451 1,510	Petition to institute a public use proceeding
1460 130	2460 130	Petitions to the Commissioner
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)
1806 180	1806 180	Submission of Information Disclosure Stmt
1809 810	1809 405	Filing a submission after final rejection (37 CFR § 1.129(a))
1810 810	2810 405	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify) \_\_\_\_\_

SUBTOTAL (2)

(\$) 540.00

## SUBMITTED BY

Name (Print/Type)	Farzad E. Amini	Registration No. (Attorney/Agent)	42,261	Telephone	(310) 207-3800
Signature		Date	02/13/09		

Based on PTO/SB/17 (02-07) as modified by Blakely, Sokoloff, Taylor & Zafman (wlr) 02/26/2007.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



# FEE TRANSMITTAL for FY 2007

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 540.00

## Complete if Known

Application Number 10/611,377  
Filing Date June 30, 2003  
First Named Inventor Louis A. Lippincott  
Examiner Name Cody, Dillon J.  
Art Unit 2183  
Attorney Docket No. 42P17013

## METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_
- ☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP  
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☒ Credit any overpayments  
☐ Charge fee(s) indicated below, except for the filing fee ☒ Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.  
☒ Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.

## FEE CALCULATION

### 1. EXTRA CLAIM FEES

	Extra Claims	Fee from below	Fee Paid
Total Claims	28	52.00	\$0.00
Independent Claims	5	220.00	\$0.00
Multiple Dependent			

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	52	2202	26	Claims in excess of 20
1201	220	2201	110	Independent claims in excess of 3
1203	390	2203	195	Multiple Dependent claim, if not paid
1204	330	2204	165	**Reissue independent claims over original patent
1205	330	2205	165	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1) (\$) 0.00

### 2. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
2053	130	2053	130	Non-English specification	
1251	130	2251	65	Extension for reply within first month	
1252	490	2252	245	Extension for reply within second month	
1253	1,110	2253	555	Extension for reply within third month	
1254	1,730	2254	865	Extension for reply within fourth month	
1255	2,350	2255	1,175	Extension for reply within fifth month	
1401	540	2401	270	Notice of Appeal	540.00
1402	540	2402	270	Filing a brief in support of an appeal	
1403	1,080	2403	540	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
1809	810	1809	405	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	810	2810	405	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)					
SUBTOTAL (2)					540.00

\*\*or number previously paid, if greater, For Reissues, see below

## SUBMITTED BY

## Complete (if applicable)

Name (Print/Type)	Farzad E. Amini	Registration No. (Attorney/Agent)	42,261	Telephone	(310) 207-3800
Signature		Date	02/13/09		